



FORM 5 CHECKRIDE DOCUMENT CHECKLIST

DATE: _____

PILOT: _____

CHECKPILOT: _____

- | | |
|---|--|
| <input type="checkbox"/> FORM-5 | <input type="checkbox"/> FORM-103 |
| <input type="checkbox"/> FORM-121 | <input type="checkbox"/> FORM-5 WRITTEN |
| <input type="checkbox"/> PILOT DATA SUMMARY | <input type="checkbox"/> PILOT LICENSE |
| <input type="checkbox"/> CURRENT MEDICAL | <input type="checkbox"/> CURRENT MEMBERSHIP |
| <input type="checkbox"/> LAST PAGE OF PILOT LOG | <input type="checkbox"/> AIRCRAFT QUESTIONNAIRE(S) |
| <input type="checkbox"/> BFR (OR EQUIVALENT) EVIDENCE | |
| <input type="checkbox"/> STATEMENT OF UNDERSTANDING | |

**ALL of the above MUST be submitted as a package or the pilot
WILL BE SUBJECT TO GROUNDING until submission is complete**